

PART B - FEE(S) TRANSMITTAL

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23334 7590 07/14/2004

FLEIT, KAIN, GIBBONS, GUTMAN, BONGINI
 & BIANCO P.L.
 ONE BOCA COMMERCE CENTER
 551 NORTHWEST 77TH STREET, SUITE 111
 BOCA RATON, FL 33487



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| |
|--------------------|
| (Depositor's name) |
| (Signature) |
| (Date) |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|---|-------------|----------------------|-------------------------------------|------------------|
| 09/739,450 | 12/18/2000 | Phillip R. Tionsgon | POU920000177US1 | 3478 |
| TITLE OF INVENTION: METHOD AND APPARATUS FOR VARIABLE DENSITY SCROLL AREA | | | 10/01/2004 TBESHAH2 00000243 090463 | 09733450 |
| | | | 01 FC:1501 1330.00 DA | |
| | | | 02 FC:1504 300.00 DA | |

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO | \$1330 | \$300 | \$1630 | 10/14/2004 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|---------------------|----------|----------------|
| MUHEBBULLAH, SAJEDA | 2174 | 345-787000 |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Floyd Gonzalez

2 Jon A. Gibbons

Fleit, Kain, Gibbons,
Gutman, Bongini &
Bianco P.L.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

International Business
 Machines Corporation

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Armonk, New York

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual **XX** corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

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XX Publication Fee (No small entity discount permitted)

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5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).

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(Authorized Signature)

(Date) 9/24/04

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